744 one occasion he did complain about weeds growing in one part of the village; he was also involved in a complaint against two men who were living in condemned houses. The first time I saw him in the village he gave an illustrated lecture on the causes of malaria and methods of malaria control. This was received in much the same spirit as any other metaphysical speculations, which people are not yet ready to share.

There is in progress in the Territory a malaria eradication campaign, for which numerous Papuan technicians have been trained and which involves, i.e., the indoors spraying of villages with DDT. While I did not see any such teams in action, I did notice that anti-malarial injections were standard treatment at the infant health clinic that was held close to Sivepe once a month. Attendance at these clinics was general for all mothers with children of pre-school age. Apart from anti-malarial injections, the nurses offered treatment for sores and other minor ailments; they weighed babies and they took seriously ill young children with them to the hospital. While it was easy to induce mothers to come, it was harder to gain acceptance for Western ideas when these conflicted with Orokaiva ones. This applied especially to child nutrition.

The health authorities had successfully campaigned against the [953] Orokaiva custom of premasticating food given to babies; mothers had stopped doing this, as it was considered uncivilised. On the other hand, nobody obeyed the instruction to wash taro before it was given [824] to babies. The washing of taro offended the spirit of the taro; it was considered out of the question. An alternative suggestion was to give babies pawpaw, considered by nutritionists to be an excellent [262] baby food. But this food was also avoided by Orokaiva, as it was thought to cause scabies. The result was that Orokaiva babies tended to go through a period of critical malnutrition after weaning and before solid taro can be digested. Our own suggestion to Orokaiva mothers--to go back to premastication--was naturally considered to be no more than a bad joke.

Section 4: Social Services: Education

871 The education system, like the public health system consists
797 of a government sector which is responsible for the bulk of education expenditure and a mission sector which is responsible for the majority of children. In 1965, the mission educated some 65% of the primary school pupils of Papua and over 60% of all pupils. Mission expenditure from its own funds was given in the Territory of Papua Report (1966: 99) as 8.6% of total expenditure on education. In the Northern District, there were four administration primary schools for Papuans (2,403 pupils in 1967) and 54 mission primary schools (8,547 pupils in 1967). The breakdown (see Table 14)[A] shows that schooling generally continues

A [See Cat. 116, p. 219--Analyst]